

This is just one more example of blatant disrespect for American law, yet we do nothing about it. We give illegals and the Mexican Government another pass. When it comes to the United States immigration policy, who is in charge? Is it Mexico City or Washington, D.C.? The answer is becoming more and more blurred.

Let me give you another serious example. In Los Angeles during the past year, the Mexican Government has provided over 100,000 Mexican text books to 1,500 schools. In fact, according to a recent Houston Chronicle editorial written by Heather McDonald, the sixth-grade Mexican history book celebrates the Mexican troops who fought against Americans during the Mexican-American War. The book refers to the enemy flag as the flag of the United States and says that the war's consequences were disastrous for Mexico.

So is this what we are going to teach American school children? Has political correctness gone so far that we now refer to Old Glory as the enemy flag? And why do we allow the Mexican Government to inundate our kids with Mexican text books anyway? This is very disturbing. The Mexican Government should spend more time enforcing their own rule of law and fighting corruption in Mexico and less time undermining our rule of law. Mexico has many advantages and natural resources. Perhaps they should take advantage of these to improve their own country so residents will quit leaving. They need to address their problems at home instead of sending them north to us.

Mr. Speaker, the lawlessness of the border will promote more lawlessness. We welcome people who want to make a better life for themselves and come to America for the American Dream, but they must do so legally. Our government cannot afford to continue to ignore the invasion from the south of our borders. The Mexican-American War started because Mexicans did not recognize the Texas-Mexico border at the time. They ignored the treaty that their dictator, Santa Anna signed, and they invaded the United States in 1846.

Sound familiar? It seems to me that a second attempt at invasion and colonization has already begun. Is Mexico trying to retake the Southwest? It is said that Caesar fiddled while Rome burned. I ask, Is Washington fiddling while the border burns with the lawlessness of an illegal invasion? Who is in charge of the U.S. immigration policy? Washington, D.C. or Mexico City? Only history will reveal the answers to that.

That is just the way it is.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Mr. WYNN) is recognized for 5 minutes.

(Mr. WYNN addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

BABY BOOMER GENERATION

Mr. BURGESS. Mr. Speaker, I ask unanimous consent to go out of order and address the House for 5 minutes.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. BURGESS) is recognized for 5 minutes.

Mr. BURGESS. Mr. Speaker, this morning at a breakfast, Chairman Alan Greenspan was talking to a group of us, and he made mention of the fact that one of his concerns about those of us who were members of the baby boomer generation, despite the fact that we may have lavish pensions or Medicare, Social Security awaiting us upon retirement, that we may suffer because there are not enough of those in the generation coming after us to provide the things that we may want; and of course one of those things we may want will be physicians to take care of us in our old age on Medicare and Social Security.

Well, there is an event happening at the end of this year that I think is particularly pernicious to the upcoming crop of young medical students and physicians, and that is a planned 4.4 percent negative update, that is, a pay cut for doctors who provide care for Medicare patients. As a Member of Congress, and as a physician, I can strongly empathize with the medical community, particularly the younger medical community as they face an impending 26 percent cut in reimbursement over the next 6 years, law already in place, cuts already programmed to happen unless this Congress takes action.

Medicare payments are already lower than the cost of delivering the care. Medicare payments do not pay the freight for overhead in a doctor's office. According to a survey conducted by the American Medical Association, a tremendous number of physicians, 38 percent, responded that they would be forced to reduce the number of Medicare patients that they accept, based on the 4.4 percent reduction that they face just for this coming year.

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This data is reflective of the first installment of a series of cuts. This is of great concern to me, as access to health care is crucial for the Medicare population. We have seen the roll-out yesterday of the availability to the part D Medicare prescription drug benefit; and many of us, myself included, have argued on the floor of this House that the Medicare prescription drug benefit is crucial to providing 21st-century medicine to our seniors. But if we have no doctors present to write the prescriptions, then all of the prescription drug benefit in the world will be of no benefit to tomorrow's seniors.

It is not just that we have doctors dropping out. We have doctors restrict-

ing the types of services that they might offer to Medicare patients, and we have doctors restricting where they might go into practice.

Well, in addition, based on these reduced reimbursement rates, doctors will be less able to invest in things that we are asking them to do, things like information technology and necessary and up-to-date medical equipment. All of these combined factors will negatively impact the quality of care that our seniors receive. Simply put, we are driving doctors out of the Medicare system, and we can no longer afford to do that.

Now, one of the proposed solutions deals with what is called Pay For Performance; and true, we should explore the concept of Pay For Performance by addressing whether this system is an improvement over the current one. It is important to establish the true quality indicators, and this is best done in conjunction with the specialty societies themselves, with the doctors themselves who will be delivering the care.

What are the goals of Pay For Performance? Well, the number one goal is better clinical outcomes. In partnership with that, we want improved patient satisfaction, and that goes hand in hand with improved physician satisfaction.

The fact is, Mr. Speaker, that doctors will support a concept like Pay For Performance if they believe in what it is trying to accomplish; but if it is just simply empty rhetoric, doctors will be among the first to recognize that and will abandon any attempts by Congress to drive a concept like Pay For Performance.

Ultimately, if Pay For Performance is structured appropriately and the cost of delivering care comes down, well, that is good. We save some dollars in the Medicare part B system, but that money cannot be used to offset other debt. It has to be put back into the system and reward those doctors who have improved quality and lowered costs.

Well, Mr. Speaker, fortunately, in my committee, in the Committee on Energy and Commerce, we are going to hold a hearing on physician reimbursement tomorrow, and it is timely. I am grateful to the chairmen, both the full committee chairman (Mr. BARTON) and the subcommittee chairman (Mr. DEAL of Georgia), for having this hearing. We are going to have good panels of witnesses present to receive our questions, and I think it is timely that my committee be involved in that discussion because, after all, that is the jurisdiction where this particular argument resides.

The SPEAKER pro tempore (Mr. JINDAL). Under a previous order of the House, the gentlewoman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)